



**PROVIDER REPORT  
FOR**

**The United Arc, Inc.  
294 Avenue A  
Turner Falls, MA 01376**

**Version**

**Public Provider Report**

**Prepared by the Department of Developmental Services  
OFFICE OF QUALITY ENHANCEMENT**

# **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	The United Arc, Inc.
<b>Review Dates</b>	10/13/2022 - 10/13/2022
<b>Service Enhancement Meeting Date</b>	8/18/2022
<b>Survey Team</b>	
<b>Citizen Volunteers</b>	

**Survey scope and findings for Residential and Individual Home Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	3 location(s) 3 audit (s)	Provider follow up	3/4 2 Year License 08/18/2022 - 08/18/2024		23 / 27 Certified 08/18/2022 - 08/18/2024
Individual Home Supports	3 location(s) 3 audit (s)			No Review	20 / 21
Planning and Quality Management				No Review	0 / 0

**EXECUTIVE SUMMARY :**

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## LICENSURE FINDINGS

	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Organizational</b>	<b>0/0</b>	<b>0/0</b>	
<b>Residential and Individual Home Supports</b>	<b>3/4</b>	<b>1/4</b>	
Individual Home Supports			
<b>Critical Indicators</b>	<b>0/0</b>	<b>0/0</b>	
<b>Total</b>	<b>3/4</b>	<b>1/4</b>	<b>75%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>1</b>	

**MASTER SCORE SHEET LICENSURE**

**Organizational: The United Arc, Inc.**

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**Residential and Individual Home Supports:**

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I		3/3					3/3	Met
L49	Informed of human rights	I		3/3					3/3	Met
L63	Med. treatment plan form	I		0/3					0/3	Not Met (0 %)
L91	Incident management	L		3/3					3/3	Met
<b>#Std. Met/# 4 Indicator</b>									3/4	
<b>Total Score</b>									3/4	
									75.00%	